

Substitute for form 1449/PTO	Complete if Known	
INFORMATION DISCLOSURE	Application Number	08/444,791
STATEMENT BY APPLICANT	Filing Date	05/19/95
(Uso soveral sheets if necessary)	First Name Inventor	Brockhaus, M.
	Group Art Unit	1644
	Examiner Name	Schwadron
Sheet 2 2	Attorney Docket Number	9191

Examiner	Cite	Include parme of the author (in CARITAL I ETTERS) title of the article (when	T ²
Initials'	No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	"
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